

Appendix B: Innovation Grant Budget Table and Justification*

Budget for Project Period: July 1, 2020 – June 30, 2023**

Name of Project: _____

COMPOSITE BUDGET FOR ENTIRE PROPOSED PROJECT PERIOD
07/01/2020 to 06/30/2023

BUDGET CATEGORY	Year 1 07/01/2020 to 06/30/2021	Year 2 07/01/2021 to 06/30/2022	Year 3 07/01/2022 to 06/30/2023	TOTAL
PERSONNEL:				
<i>Salary and fringe benefits.</i>	\$0	\$0	\$0	\$0
TRAVEL	\$0	\$0	\$0	\$0
MATERIALS & SUPPLIES	\$0	\$0	\$0	\$0
EQUIPMENT	\$0	\$0	\$0	\$0
CONSULTANT	\$0	\$0	\$0	\$0
SUBRECIPIENT	\$0	\$0	\$0	\$0
OTHER DIRECT COSTS (ODC)	\$0	\$0	\$0	\$0
ODC #1	\$0	\$0	\$0	\$0
ODC #2	\$0	\$0	\$0	\$0
ODC #3	\$0	\$0	\$0	\$0
TOTAL DIRECT COSTS	\$0	\$0	\$0	\$0
Indirect (F&A) Costs <i>Rate ≤ 8%***</i>	\$0	\$0	\$0	\$0
TOTAL COSTS PER YEAR	\$0	\$0		
TOTAL COSTS FOR PROPOSED PROJECT PERIOD****				\$0

* This is a sample template for Appendix B. Please limit this appendix to two pages. Additional pages may be (but are not required to be) submitted for subawardee/subrecipient information, pursuant to Item 6 below.

** Innovation grants are intended to fund projects for 3 years.

*** The Indirect Cost Rate should be equal to or less than 8 percent of combined project direct costs. Please indicate what rate you will be using and multiply Total Direct Costs by that rate to calculate Total Indirect Costs. Indirect Costs cannot exceed \$74,074 for the grant period.

**** Total Costs for Proposed Project (indirect plus direct costs) cannot exceed \$1,000,000 over the 3 years.

Additional Note: Project Period Budget Flexibility—Prior approval will be required for budget changes between approved budget categories above the negotiated thresholds.

Budget Justification

This section is intended to expand on information provided in the table on B-1, as well as the Project Narrative's discussion of how grant funds will contribute to the development, implementation, and assessment of the project's planned pedagogical/curricular innovation. Please respond to the following items, using tables with explanatory notes, where possible. If explanations have already been provided in the Project Narrative, please indicate "already provided."

1. **Personnel.** Starting with the principal investigators and co-principal investigators, please provide the names of all known personnel who will be involved on the project for each year of the proposed project period. Please include positions that are known but personnel have not yet been identified as "to be determined" (TBD). Please provide their role on the project, including "to-be-determined" positions. Please include separately the costs of fringe benefits, according to your institution's policy. Note: "Percent Effort" is relative to the individual's total work time. Example: 50% FTE would indicate that half of the individual's work time will be devoted to this project.

Sample Table:

<i>Personnel Name</i>	<i>Role on Project</i>	<i>Percent Effort</i>	<i>Year 1 Salary</i>	<i>Year 1 Benefits</i>	<i>Year 2 Salary</i>	<i>Year 2 Benefits</i>

2. **Travel.** Please provide a summary of anticipated travel expenses by year that are estimated in the table on page B-1. Travel must comply with your institution's travel guidelines.
3. **Materials and Supplies.** Please itemize estimated materials and supplies in separate categories. For software purchases, please list in this category.
4. **Equipment.** Please list each item of equipment anticipated to be necessary and estimated cost. For technology hardware, please list in this category.
5. **Consultant Costs.** Consultants are individuals/organizations who provide expert advisory or other services for brief or limited periods and do not provide a percentage of effort to the project or program. Consultants are not involved in the scientific or technical direction of the project as a whole. Please provide the names and organizational affiliations of all consultants. Describe the services to be performed, and include the number of days of anticipated consultation, the expected rate of compensation, travel, and/or other related costs.
6. **Subawardee/Subrecipient (Consortium) Costs.** Please list each subawardee/subrecipient anticipated for your project and estimated amount. For projects that are awarded, a detailed budget (table in B-1, plus justification) will be required for each subawardee/subrecipient as part of the award agreement. Detailed subawardee/subrecipient information may be included now beyond the 2-page limit, but it is not required as part of this submission. If a project has not decided whom to list as subawardees/subrecipients vs. personnel, this may be negotiated as part of the award agreement.
7. **Other Direct Costs.** Itemize any other expenses by category and cost. Example: If the Scope of Work will be performed in an off-campus facility rented from a third party for a specific project or projects, then rent may be charged as a direct expense to the award if justified.